MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.	FILING DATE
10821076	

APPLICANT(S)

CLAIMS

	AS FILED		1ST AMENDMENT		2ND AMENDMENT				IND	DEP	IND	DEP	IND	DEP
	IND	DEP	IND	DEP	IND	DEP								
1	1							51						
2								52						
3								53						
4								54						
5								55						
6								56						
7	1							57						
8								58						
9								59						
10								60						
11								61						
12								62						
13		6						63						
14		6						64						
15		6						65						
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42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	2							TOTAL IND.						
TOTAL DEP.	34							TOTAL DEP.						
TOTAL CLAIMS	36							TOTAL CLAIMS						